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CONFIRMATION NO. 5163

Bib Data Sheet

SERIAL NUMBER 10/648,548	FILING DATE 08/25/2003  RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 104664-50037
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/829,446 04/09/2001 ABN  
 which claims benefit of 60/195,231 04/07/2000 *PAD*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*CON'S PAD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY SPAIN	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
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Verified and Acknowledged

Examiner's Signature *PAS* Initials

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26345  
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TITLE

Diagnostic test for Alzheimer's disease

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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